

PRESENTATION HANDOUT

Presentation Title: Implementing a Health and Safety Intervention Program through Community Environmental Health Workers

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Project Overview

SERI is a community-based, non-profit organization that has been extensively involved with environmental, health and safety issues in southern Arizona for over sixteen years. We partner with neighborhoods that are under economic, environmental and health stress and help determine the risks to which the residents are exposed and actions to be taken to reduce those risks. We fulfill this mission by conducting risk assessments and healthy homes interventions, providing technical assistance and training, conducting community participatory research and partnering with organizations to offer educational opportunities. We take a comprehensive approach to addressing multiple environmental, health and safety issues in the home by focusing on hazards in a coordinated fashion, rather than addressing a single hazard at a time and have adopted the healthy homes concept as our risk reduction strategy. Our FP&S grant funded fire prevention program works in conjunction with our Department of Housing and Urban Development (HUD) healthy homes production grant, where we use the HUD Healthy Homes Rating System (HHRS) to assess twenty-nine hazards including fire. This program is implemented by SERI promotoras (community environmental health workers). Our current project addresses the lack of fire alarms and knowledge of fire prevention and safety in the target area through visiting homes, conducting assessment and installing over 5,000 alarms.

Formative Evaluation (Risk Assessment)

This vulnerability of the target population was determined by an in-house review of statistics collected during our past home visit and smoke alarm installation programs. During the home visits we completed surveys that recorded the number of working and nonworking smoke alarms in the home prior to the visits and the number installed during the visit. Household demographics were collected as well as data on the families' knowledge and use of emergency escape plans. We installed 2,500 smoke alarms in 555 homes in the target area and only 22% had a working smoke alarm. (Only 28% had any alarm at all.) Only 21% of the families with children under the age five, only 25% of the families with members over 65 and 33% of the families with members who were disabled had a working smoke alarm. The percentage was even lower for families with smokers, only 15%. Only 4 families of the 555 had the recommended number of alarms; most families had only one, nonworking or working. Only 3% of families had a fire escape plan and most had not practiced the plan in the past year. Our statistics clearly showed the great need for continued and expanded fire safety interventions.

Program Description

Target area - The target area is four ZIP codes in southern metropolitan Tucson, Arizona with a population of approximately 180,000. This area has a variety of socio-economic and environmental risk factors including high poverty rates, high concentration of minority (Hispanic) families, high concentration of sensitive populations including children and elderly and a large number of the population lacking high school diplomas. The oldest and most crowded housing units in the County are

located in the target area. Not only are the families in the target area more at risk than residents in the metropolitan area in general, they also have fewer resources and opportunities to reduce that risk.

Goals - The key measurable goals are to: (1) Install a minimum of 5,100 smoke alarms in the target area with a minimum of 75 of the alarms being for deaf/hard of hearing individuals; (2) Develop a standard smoke alarm installation/maintenance and fire safety segment in Spanish to be included in SERI's community health worker training course that is required of all staff and volunteers before conducting home visits; (3) Train at least 10 new SERI staff or volunteers with the new segment; (4) Develop a new bilingual home inspection checklist that includes fire prevention and safety and inspect a minimum of 1,200 homes; and (5) Conduct a minimum of 25 community outreach and educational events.

Program Impact

The program impact is significant as demonstrated by the results given in the table below. Only 13% of the homes visited had a working smoke alarm, while 21% had nonworking alarms. Only 1% of families had a fire escape plan and most had not practiced the plan in the past year. All homes received the recommended number of alarms during the home visit. Additional healthy homes interventions were completed in the 750 homes assessed with the HHRS including interventions against falls, excess heat, electrical hazards, mold and moisture, food safety, entry by intruders, structural collapse and carbon monoxide (CO). 120 grab bars were installed in homes with elderly or disabled residents, and over 800 CO alarms were installed. Only 1.3% of the homes in need of CO alarms had a working or nonworking alarm. Sixty-four of the homes received construction interventions such as replacing or repairing evaporative coolers, roofs, cabinets and/or leaking plumbing.

CATEGORY	GOAL	ACTUAL (4/18/12)
Homes inspected	1,200	1,016
Alarms installed	5,100	4,640
Alarms deaf/hard of hearing	75	15
Staff/volunteers trained	10	31
Community Outreach/Education Events	25	44
Home Risk Assessments (HHRS)	N/A	750

The project has substantial potential for long-term benefits. The outreach campaign focuses not only on smoke alarm installation but also on long-term community risk reduction by changing perceptions and behavior. The new training course for staff and volunteers elevated their expertise and understanding of fire prevention and safety and increased their job skills. The educational events for community members increases their understanding as well and assists them in making safety improvement decisions for their families. In addition the Community Advisory Board as an active board with more than 30 participating organizations and individuals support local fire prevention and safety infrastructure through education, collaboration and fundraising.

Conclusions

We have expanded our existing program to include healthy homes principles and have demonstrated that trained community workers can effectively and efficiently implement fire prevention and safety programs. We are building healthy homes community capacity that promotes long-term sustainability through mainstreaming the healthy homes approach, developing a trained workforce, generating community support and ownership and leveraging community resources to continue the program after grant funding has ended.